

HEP IS Interim Report Technical Assistance

April 14, 2022

Office of Postsecondary Education



Higher Education Programs
Institutional Service

Agenda

- Welcome: Beatriz Ceja, Jason Cottrell, Nemeka Mason, Alex Brown, Jim Kiley-Zufelt
- Interim Performance Report (IPR) Sections
 - Grant Identification
 - Cover Sheet
 - Executive Summary
 - Section A – Performance Objectives
 - Section B – Budget Information
 - Section C – Additional Information

Home Page: <https://hepis.ed.gov>

HEP IS

Higher Education Programs: Institutional Service

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Welcome to the HEPIS Web Portal

- GEA Grant Eligibility Application
- IS APR Titles III & V Annual Performance Reporting System
- EFRS Endowment Financial Reporting System
- FIPSE Reporting System

System Status and Important Dates

Grant Eligibility Application system: Closed
Open 12/13/2021 to 01/21/2022

Titles III/V Annual Performance Reporting system: Open
Open 01/05/2022 to 03/18/2022

Titles III/V Interim Reporting system: Closed
(first year grantees only) Open 04/01/2022 to 04/30/2022

Endowment Financial Reporting System: Open
Open from 7/24/2020 to April 2021 (exact closing date TBA)

Fund for the Improvement of Postsecondary Education: Closed
System open dates to be announced

Returning User? Login Below.

Email:

Password:

[Forgot your password?](#) [Need Help?](#)

[Login](#)

New to HEP IS?

Click the button below to get started

[New User](#)

Dashboard

HEP IS

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Welcome test@statecollege.edu

ISAPR - Annual and Interim Performance Reports

Your grants in the ISAPR system:

PR#	Report Type	Data Entry Window	Status	Enter System
P000X190000 ↕	Interim	04/01/2020 - 04/30/2020	In Progress	GO

Home Page / Director's Letter

ISAPR

Institutional Services Annual Performance Reporting System

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Welcome

PR/Award Number:

Reporting Period: 10/01/2021 to 03/31/2022

Grantee Name:

Program Officer:

Director's Letter

Dear Project Director,

This message is a reminder that as a grantee institution receiving Title III or Title V funds, you must provide an Interim Performance Report to the Department of Education explaining the status of your grant project.

The data collection website is located at <https://hepis.ed.gov/> and it will be available starting on April 1, 2022. The report is due on April 30, 2022.

Please complete this report as soon as possible so that program staff can review the information in a timely manner. Should there be any changes to that timeframe, we will notify you.

Instructions for completing the performance report and a copy of the blank form can be found on the Help page. Please review the instructions before you begin your report.

If you have any questions, please contact the Help Desk at hepis.helpdesk@thetactilegroup.com or your assigned Program Officer. Please note that questions involving report content and program-related decision-making should be directed to your IS Program Officer.

We look forward to helping you complete the report in a timely fashion.

Sincerely,

The IS Technical Support Team

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Welcome

PR/Award Number: |

Reporting Period: 10/01/2021 to 03/31/2022

Grantee Name:

Program Officer:

IS APR Home / Grant Identification

Grant Identification

Please verify the information below and click the 'Save and Continue' button to begin your report. If someone other than the project director is entering the report, please enter your name and contact information in the data entry fields.

General Information

General Information

PR Award Number: |

Program:

Unit ID:

Grantee Name (Institution Name):

Address 1:

Address 2: (Optional)

City:

State:

Zip:

Zip + 4:

Project Title:

Institution Type/Control:

Grant Type:

Project Director

Editing this information does not create or edit user accounts. Please contact the [Help Desk](#) to request a new account setup.

First Name:

Last Name:

Title:

Email:

Office Phone:

EXT.

Cell Phone:

Additional Contact Person Information

Editing this information does not create or edit user accounts. Please contact the [Help Desk](#) to request a new account setup.

First Name:

Last Name:

Email:

Office Phone:

EXT.

Cell Phone:

Grant and Report Information

Grant Award Year: 10/01/2021

Grant End Year: 09/30/2026

Reporting From: 10/01/2021 to 03/31/2022

Program Officer:

Total Duration of Grant: 5 Yrs

Cancel

Save and Continue

Cover Sheet

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PR/Award Number:

Reporting Period: 10/01/2021 to 03/31/2022

Grantee Name:

Program Officer:

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Cover Sheet - Interim

1. Budget Expenditures

Report your actual budget expenditures for the entire previous budget period (i.e., through 30 days before the due date of this report). Please separate expenditures into Federal grant funds and non-Federal funds (match/cost-share) expended for the project during the current budget period to date.

Budget Period	Federal Grant Funds	Non-Federal Funds (Match/Cost Share)
Current Budget Period	<input type="text"/>	<input type="text"/>

2. Indirect Cost Information (To be completed by your Business Office)

Are you claiming indirect costs under this grant?

☐ No ☒ Yes


If yes, please indicate which of the following applies to your grant

Cover Sheet



a.The grantee has an Indirect Cost Rate Agreement approved by the Federal Government:

The period covered by the Indirect Cost Rate Agreement is from:

 to 

The approving Federal Agency is:

☐

ED



Other (Please specify)

The Indirect Cost Rate is:

☐

b.The grantee is not a State, local government, or Indian tribe, and is using the de minimus rate of 10% of modified total direct costs (MTDC) in compliance with 2 CFR 200.414(f):

☐

c.The grantee is funded under a Restricted Rate Program and is using a restricted indirect cost rate that either:

☐

d.The grantee is funded under a Training Rate Program and:

3. Human Subjects (Annual Institutional Review Board (IRB) Certification)

Is the annual certification of Institutional Review Board (IRB) approval attached?

☐ No ☐ Yes ☐ N/A

4. Data Privacy and Security Measures Certification

Is a statement affirming that you are aware of federal and state data security and security and student privacy regulations included, with supporting documentation attached?

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Is a statement affirming that you are aware of federal and state data security and security and student privacy regulations included, with supporting documentation attached?

☐ No ☒ Yes

b.If no, when will the data be available and submitted to the Department

Optional. You may upload up to three files with additional information, such as a spreadsheet with a budget breakdown, an IRB Certification, or a Data Privacy and Security Measures Certification. Files must be in PDF, MS Word, or Excel format. You are not required to upload any files.

3. Human Subjects (Annual Institutional Review Board (IRB) Certification)

Is the annual certification of Institutional Review Board (IRB) approval attached?

☐ No ☐ Yes ☒ N/A

4. Data Privacy and Security Measures Certification

Is a statement affirming that you are aware of federal and state data security and security and student privacy regulations included, with supporting documentation attached?

☐ No ☒ Yes


5. Performance Measures Status and Certification

a. Are complete data on performance measures for the current budget period in the Project Status Chart?

☐ No ☐ Yes

b. If no, when will the data be available and submitted to the Department

Optional. You may upload up to three files with additional information, such as a spreadsheet with a budget breakdown, an IRB Certification, or a Data Privacy and Security Measures Certification. Files must be in PDF, MS Word, or Excel format. You are not required to upload any files.

 **UPLOAD FILE**

Word, Excel, and PDF documents only; max file size is 20MB; three document limit.

Save

Save and Continue to Executive Summary

Executive Summary

ISAPR
Institutional Services Annual Performance Reporting System

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Welcome

PR/Award Number:

Reporting Period: 10/01/2021 to 03/31/2022

Grantee Name:

Program Officer:

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Executive Summary - Interim

Provide a one to two page Executive Summary for annual performance reports and a two to three page Executive Summary for final performance reports. Provide highlights of the project's goals, the extent to which the expected outcomes and performance measures were achieved, and what contributions the project has made to research, knowledge, practice, and/or policy. Include the population served, if appropriate.

You have 335 character(s) left.

Save

Save and Continue to Section A

Section A – Performance Objectives

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Section A: Performance Objectives

In your approved grant application, you established project objectives stating what you hope to achieve with your funded grant project. Generally, one or more performance measures were also established for each project objective that serve to demonstrate whether you have met or are making progress towards meeting each project objective. In addition to project-specific performance measures that you may have established in your approved grant application, performance measures have been established by ED for the grant program that you are required to report on.

[Read More](#)



Note: Complete data must be submitted for any performance measures established by ED for the grant program and for any project-specific performance measures that were included in your approved grant application.

Add an Objective and Performance Measure

Continue to Section B

*Objective 1

Objective Description:

Please enter the name of your Objective with a brief description of it, including data and references to goals stated in your application as appropriate, to document the work towards this objective during the current reporting period. Please include any unexpected results, and any details necessary to fully describe the current objective status as appropriate (e.g., updated completion date, whether a change in objective was approved by the Program Office, why objective will not be achieved, etc.).

You have 4000 character(s) left.

Objective Status:

On schedule



*Performance Measure 1.1

Performance Measure Description:

You have 4000 character(s) left.

Measure Type:

Project



Date Last Measured:



How Often Do You Measure ?

Data Type:

☐

Raw Number

☐

Ratio

Target

Actual

Note: You must answer all questions above in order to save your objective & performance measure. If you have more than one performance measure for this objective, you can add it after you click Save.

Cancel

Save

*Objective 1

Objective Description:

Please enter the name of your Objective with a brief description of it, including data and references to goals stated in your application as appropriate, to document the work towards this objective during the current reporting period. Please include any unexpected results, and any details necessary to fully describe the current objective status as appropriate (e.g., updated completion date, whether a change in objective was approved by the Program Office, why objective will not be achieved, etc.).

You have 4000 character(s) left.

*Objective 1

Objective Description:

Please enter the name of your Objective with a brief description of it, including data and references to goals stated in your application as appropriate, to document the work towards this objective during the current reporting period. Please include any unexpected results, and any details necessary to fully describe the current objective status as appropriate (e.g., updated completion date, whether a change in objective was approved by the Program Office, why objective will not be achieved, etc.).

You have 4000 character(s) left.

Objective Status:

On schedule



*Objective 1

Objective Description:

Please enter the name of your Objective with a brief description of the work to be done, as appropriate, to document the work towards this objective during the reporting period, results, and any details necessary to fully describe the current objective. If a change in objective was approved by the Program Office, why did it change?

You have 4000 character(s) left.

Objective Status:

*Performance Measure 1.1

Performance Measure Description:

You have 4000 character(s) left.

Measure Type:

How Often Do You Measure ?

Data Type: ☐ Raw Number

☐ Ratio

Note: You must answer all questions above in order to save your objective & performance measure. If you have more than one performance measure for this objective, you can add it after you click Save.

Cancel

*Performance Measure 1.1

Performance Measure Description:

You have 4000 character(s) left.

Measure Type:

Date Last Measured:

How Often Do You Measure ?

Data Type: ☐ Raw Number

☐ Ratio

Target	Actual
<input type="text"/>	<input type="text"/>

Note: You must answer all questions above in order to save your objective & performance measure. If you have more than one performance measure for this objective, you can add it after you click Save.

Cancel

Save

Data Type:



Raw Number



Ratio

Target	Actual
<input type="text"/>	<input type="text"/>

or

Data Type:



Raw Number



Ratio

Target	Actual
<input type="text" value="Numerator"/>	<input type="text" value="Numerator"/>
/	/
<input type="text" value="Denominator"/>	<input type="text" value="Denominator"/>

Objective 1/1

Show Objective & Measure

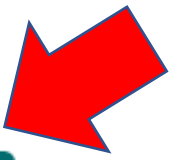
Increase the number of students eligible for admission to the XYZ Program by 10% by May 31, 2020 ...

| **Performance Measure 1/1** : Number of students passing Course 101 will increase from 50 to 75...

Add an Objective and Performance Measure

Continue to Section B

Objective 1/1

[Hide Objective & Measure](#)[Edit Objective & Measure](#)

Objective Description:

Please enter the name of your Objective with a brief description of it, including data and references to goals stated in your application as appropriate, to document the work towards this objective during the current reporting period. Please include any unexpected results, and any details necessary to fully describe the current objective status as appropriate (e.g., updated completion date, whether a change in objective was approved by the Program Office, why objective will not be achieved, etc.).

Increase the number of students eligible for admission to the XYZ Program by 10% by May 31, 2020

You have 3904 character(s) left.

Objective Status:

On schedule



Performance Measure 1/1 :

Objective 1/1

Delete Objective & Measure

Objective Description:

Please enter the name of your Objective with a brief description of it, including data and references to goals stated in your application as appropriate, to document the work towards this objective during the current reporting period. Please include any unexpected results, and any details necessary to fully describe the current objective status as appropriate (e.g., updated completion date, whether a change in objective was approved by the Program Office, why objective will not be achieved, etc.).

Increase the number of students eligible for admission to the XYZ Program by 10% by May 31, 2020

You have 3904 character(s) left.

Objective Status: On schedule

Performance Measure 1/1 :

Delete Measure

Data Type:



Raw Number



Ratio

Target	Actual
75.00	50.00

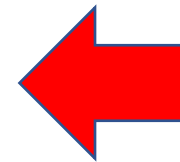
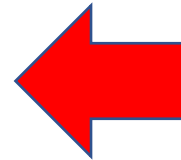
Add Another Measure

Cancel

Save

Add an Objective and Performance Measure

Continue to Section B



Section B – Budget Information

Section B: Budget Information

1. Budget Information

If you would like to provide a spreadsheet of budget information, you may do so on the File Upload page.

- For budget expenditures made with Federal grant funds, you must provide an explanation if funds have not been drawn down from the G5 System to pay for the budget expenditure amounts in the Current Budget Period row in item 1 on this report's Cover Sheet tab.
- Provide an explanation if you did not expend funds at the expected rate during the reporting period.
- Describe any significant changes to your budget resulting from modification of project activities.
- Describe any changes to your budget that affected your ability to achieve your approved project activities and/or project objectives.



You have 1897 character(s) left.

Save

Save and Continue to Section C

Section C – Additional Information

Section C: Additional Information

1. Additional Information

Enter any additional information you would like to provide below.

- If applicable, please provide a list of current partners on your grant and indicate if any partners changed during the reporting period. Please indicate if you anticipate any change in partners during the next budget period. If any of your partners changed during the reporting period, please describe whether this impacted your ability to achieve your approved project objectives and/or project activities.
- If instructed by your program office, please report on any statutory reporting requirements for this grant program.
- Describe any changes that you wish to make in the grant's activities for the next budget period that are consistent with the scope and objectives of your approved application.
- If you are requesting changes to the approved Project Director listed in Block 3 of your GAN and/or to other approved key personnel listed in Block 4 with a proposed effective date during the remainder of the current budget period or the next budget period, please indicate the name, title and percentage of time of the requested key personnel. Please indicate whether the proposed Project Director curriculum vitae for the proposed key personnel when you submit your performance report.
- Provide any other appropriate information about the status of your project including any unanticipated outcomes or benefits from your project.

You have 3997 character(s) left.

Save

Save and Continue to Review and Certification

Review

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Review and Certification - Interim

Review

Certification

Submit


Review Your Report

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!	<div>Go to Section</div>

Section A: Performance Objectives	
✓	<div>Go to Section</div>

Certify

Review	Certification	Submit
<h2>Certification</h2> <p>Review the information below. If any of the items in 3-5 need to be changed, return to the Grant Identification page and update it there. Otherwise, please enter the authorizing representative information and click the Save and Continue button. You do not need to send a signed certification form to ED or upload a signed certification form.</p>		
1. Reporting Period 10/1/2018 to 09/30/2019		 Return to Grant Identification Page to Edit
2. PR Award Number P000X000000		
3. Project Title Excellent Grant Project		
4. Recipient Information <u>Name:</u> Community State College University <u>Address:</u> 1200 State Capital Boulevard, State Capital, US 12345		
5. Contact Information <u>Name:</u> Jane Doe <u>Title:</u> Project Director <u>Phone:</u> (888) 555-1212 <u>Email:</u> jane.doe@commstatecolluniv.edu		

Certify

6. Authorized Representative

(The Institutions President or someone with the institutional authority to sign off on federal sponsored agreements) **To the best of my knowledge and belief, all data in this performance report are true and correct.**

Name

Email

Phone

Date



Save and Continue

Submit

Review

Certification

Submit

Ready to Submit

Your report and certification are complete.

Click the button below to submit.

If you have questions before you submit, contact the Help Desk or your Program Officer.

Submit Report

If you have questions, please contact the Help Desk or your Program Officer.

View Reports

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Help Page

IS APR Resources

Annual Performance Reports :

IS APR [User Guide v 1.4](#) in PDF format

IS APR [Technical Assistance slides](#) in PDF format

IS APR [Blank APR Form \(all grants\)](#) in PDF format

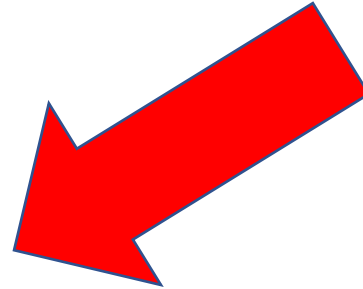
Interim Performance Reports (first year grantees only) :

The [Interim Report User Guide v 1.1](#) in PDF format

[Instructions](#) in PDF format

Download a [Cover Sheet and Executive Summary](#) in PDF format

Download a [Sections A-C: Project Status, Budget, & Additional Information](#) in PDF format



Contact Us

Contact Us

Help Desk Hours: Mon - Fri 9:00 am - 5:00 pm (Eastern)

First Name:

Last Name:

Email:


Institution Name:

Reason For Inquiry:

Message:

PLEASE INCLUDE YOUR OPEID or PR NUMBER IN YOUR MESSAGE

☐ I'm not a robot


reCAPTCHA
[Privacy](#) [Terms](#)

Send

HEPIS.HelpDesk@TheTactileGroup.com

Despite our best efforts, sometimes our emails land in Spam or Junk Mail folders.
Please consider adding our help desk email address to your software's Safe Senders list.

Account

User Profile

Email:

Change Password

Two Factor Authentication			
Type	Phone Number	Default	Update Information
Authy		<input type="radio"/>	Get Started With Authy
Text		<input type="radio"/>	Update
Voice		<input type="radio"/>	Update

Thank You!

A recording of this webinar will be posted on the Help page in a few days after Closed Captions have been added.

All questions submitted today via the Chat box will be consolidated, answered, and posted on the Help page as an FAQ document.

Office of Postsecondary Education



Higher Education Programs
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